

ISSUE SLIP STAPLE AREA (for optional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	smc		11/15/99
O.I.P.E. CLASSIFIER		16	11/18/99
FORMALITY REVIEW		169652	12/01/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	9/24/99
2	11/2/99
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Claim	Date
51	9/24/99
52	11/2/99
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Claim	Date
110	11/2/99
112	11/3/99
113	11/3/99
114	11/4/99
115	11/5/99
116	11/5/99
117	11/5/99
118	11/5/99
119	11/5/99
120	11/6/99
121	11/11/99
122	11/12/99
123	11/13/99
124	11/13/99
125	11/13/99
126	11/13/99
127	11/17/99
128	11/18/99
129	11/19/99
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131	11/21/99
132	11/21/99
133	11/22/99
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If more than 150 claims or 10 actions
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RIGHT SIDE HANDLE COPY